CLAIMS ONLY

Application Number	Filing Date
09/997193	

Applicant(s)

nie

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend								
1							51							
2							52							
3							53							
4							54							
5							55							
6							56							
7							57							
8							58							
9							59							
10							60							
11							61							
12							62							
13							63	1						
14							64		1					
15							65		1					
16							66		1					
17							67		1					
18							68		1					
19							69		1					
20							70		1					
21							71		1					
22							72		1					
23							73	1						
24							74		1					
25							75		1					
26							76		1					
27							77		1					
28							78		1					
29							79		1					
30							80		1					
31							81		1					
32							82	1						
33							83		1					
34							84		1					
35							85		1					
36							86		1					
37							87		1					
38							88		1					
39							89		1					
40							90							
41							91		1					
42							92	1						
43							93		1					
44							94		1					
45							95		1					
46							96		1					
47							97		1					
48							98		1					
49							99		1					
50							100		1					
Total Indep							Total Indep	4						
Total Depend							Total Depend	34						
Total Claims							Total Claims	38						